

JOINT DISTRICTS
OF
The Borough of Queenborough
THE
Urban District of Sheerness
AND
Sheppey Rural District

ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE YEAR

1946.

R. DUNCAN DEWAR,
M.B., Ch.B., B.Sc., D.P.H.
MEDICAL OFFICER OF HEALTH.

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Isle of Sheppey

(Medical Officer of Health)

JOINT COMMITTEE 1946.

Chairman :

H. C. LOVE, J.P.

Members :

Queenborough Town Council :

Ald. Mrs. E. S. WEEKES, J.P.

Ald. G. R. STEVENS, J.P.

Sheerness Urban District Council :

A. G. COATS, J.P.

Rev. A. B. MORLEY, M.A.

C. F. SADDLETON.

R. J. DAVEY, C.C.

J. G. WARD.

Sheppey Rural District Council :

H. C. LOVE, J.P.

T. H. DALE.

Clerk :

HORACE V. STALLON, Solicitor.

Medical Officer of Health :

R. DUNCAN DEWAR, M.B., Ch.B., B.Sc., D.P.H.

PUBLIC HEALTH DEPARTMENT,
TRINITY ROAD,
SHEERNESS.

June, 1947.

*TO THE CHAIRMAN AND MEMBERS OF THE ISLE OF
SHEPPEY JOINT MEDICAL OFFICER OF
HEALTH COMMITTEE.*

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to submit my report on the Public Health and Sanitary conditions of the Isle of Sheppey for the year ended 31st December, 1946.

Dr. M. F. McNamara, following the retirement of Dr. Griffith, took over the duties of part-time Medical Officer of Health in March, 1946 until you reverted by my appointment in November to the peacetime practice of having a full time Medical Officer of Health. It must be realized that the efficiency of the Public Health Department and the increase in the services available to the public were largely due to the energy and enthusiasm of Dr. McNamara. My own thanks are due to him for his very willing and able assistance which helped me considerably in taking over my duties.

From 1928 the Medical Officer of Health has acted for all three authorities and the co-ordination of the health services which was made possible has resulted in considerable improvement in the health of the population of the Island. When the National Health Service Act of 1946 comes into force it will result in a further unification of the health services, and it is thus hoped that still greater advancements will be made in the prevention of disease and the promotion of the Public Health.

Since the appointment of the first Medical Officer of Health one hundred years ago in Liverpool, the conception of Public Health and Preventive Medicine has changed considerably. Whilst health was considered negatively, that is, to be a state of not suffering from any kind of disease, the prevention of disease could be regarded as the ultimate aim; but when health is regarded as the attainment and maintenance of the highest degree of physical, mental and spiritual development of which the individual is capable, the field of Public Health is greatly widened.

It is natural that children must receive the first consideration for they are the people on whom the future of our country depends. Without adequate numbers of healthy children the manpower of the country, which is at present seriously short, would in the future be quite unable to maintain the standards of living for which we are now striving. During the recent war some increase in births was probably due to the fact that many women considered that they could better serve the nation by motherhood than by some other form of National Service. With new housing mainly in the hands of the Local Authorities the priority given to large families may have some effect in increasing the birth rate, but it is perhaps of more importance that a large family appears to be becoming more "fashionable." The payment of family allowances under the Family Allowance Act of 1945 which came into effect in August 1946 may also have some slight effect, but if this were to be considered as a major inducement

towards parenthood it might be said, as of other countries, that the Government was "trying to buy babies at bargain prices." Whatever the cause the recent large rise in the birth rate is very satisfactory, but in the words of the Registrar General, "In view of the fact that 1946 is the first complete calendar year after the termination of the war, the experience must be expected to be an abnormal one." It would therefore be unwise to assume that the increased birth rate is likely to be more permanent than that which occurred in the post-war period of 1921-22 and for this reason alone it is essential that all possible steps should be taken to preserve the lives of those children that are born.

Immunisation against Diphtheria has saved thousands of children, but the number unprotected against this disease in the Isle of Sheppey still leaves much to be desired. The problems of protection against other diseases of childhood and the causation and prevention of prematurity are receiving much well deserved attention and it is hoped that progress will be made in the future.

New housing is providing a suitable environment where the good habits of hygiene which are taught in the schools can be practised in the home, but building is restricted by lack of labour and materials. Apart from physical well being, it is now realized that an unhappy child is not really healthy in the fuller sense, that the emotional background is as important as the material one and that an Infant Welfare Clinic can prevent delinquency better than a Juvenile Court. It must be remembered also that good houses alone cannot bring the problem families to a satisfactory standard.

At the other end of the scale it is estimated that men over sixty-five years of age and women over sixty years now comprise 12% of the population and that this proportion may increase to 19% in fifty years time. With the increase in the study of geriatrics the needs of the aged are now becoming more generally recognised but these are less easily supplied under post-war conditions. Children can rely upon the protection of their parents but only too often the old people have to depend upon the charity and good will of their neighbours. In particular the aged sick need much more care and attention than can at present be supplied. Accommodation for persons from this area is provided by the Kent County Council but in spite of all the efforts that have been made an acute shortage of Nursing Staff makes present provision quite inadequate.

The meteorological station at Sheerness was dismantled during the war and has not yet been re-established. It is due to the enthusiasm of Mr. E. W. Cooper of Ad Astra, Warden Point, that the data tabulated at the end of this report was collected by him at his private observatory. I am greatly indebted to him for his kindness in allowing me to publish this information.

I have to thank you for your help and encouragement and my thanks are also due to the staffs of all three authorities and especially to Mr. F. Pankhurst who returned to his post as Chief Clerk in September 1946 after his demobilization.

I am,

Your obedient servant,

R. DUNCAN DEWAR,

Medical Officer of Health.

BIRTH-RATE, DEATH-RATE, AND ANALYSIS OF MORTALITY DURING THE YEAR 1946.

	RATE PER 1,000 TOTAL POPULA- TION.		ANNUAL DEATH-RATE PER 1,000 POPULATION,							
	Live Births	Still- Births	ALL CAUSES	Typhoid and Para- typhoid	Small-pox	Measles	Scarlet fever	Whooping cough	Diphtheria	Influenza
England and Wales ...	19.1	0.53	11.5	0.00	0.00	0.00	0.00	0.02	0.01	0.15
Sheerness Urban District ...	21.4	0.14	13.0	0.00	0.00	0.00	0.00	0.00	0.00	0.28
Borough of Queenborough ...	25.5	0.63	10.7	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Sheppey Rural District ...	22.3	0.48	11.6	0.00	0.00	0.00	0.00	0.00	0.00	0.24

Birth-rate, Death-rate and Infantile Mortality.

	Queenborough.				Sheerness.				Sheppey Rural.				England and Wales.			
	1943	1944	1945	1946	1943	1944	1945	1946	1943	1944	1945	1946	1943	1944	1945	1946
Infant Mortality per 1,000 live births ...	41.1	14.3	67.8	27.0	57.3	32.6	25.9	56.3	51.3	54.6	5.5	38.0	49.0	46.0	46.0	43.0
Deaths from Diarrhoea and Enteritis (under 2 years) per 1,000 related births ...	0.0	0.0	0.0	0.0	4.0	1.9	3.7	0.0	0.0	0.0	0.0	0.0	5.3	4.8	5.6	4.4
Maternal Mortality per 1,000 total (live and still) births	0.0	0.0	0.0	13.2	0.0	0.0	0.0	0.0	6.25	0.0	0.0	0.0	—	1.93	1.79	1.43
Cases of Puerperal Pyrexia notified per 1,000 total (live and still) births ...	0.0	0.0	0.0	0.0	0.0	3.50	3.63	3.29	0.0	0.0	0.0	0.0	—	10.3	9.93	8.50
Still-births per 1,000 of population ...	0.37	1.13	0.0	0.68	0.39	0.77	0.38	0.14	0.57	0.14	1.05	0.49	0.50	0.50	0.46	0.53

Vital Statistics.

QUEENBOROUGH, SHEERNESS and SHEPPEY RURAL, 1943-44-45-46.

District	Year	Estimated Population	Births			Deaths			
			Total	Illegitimate and Rate per cent	Birth-rate per 1,000 of population	Total	Death-rate per 1,000 of population	Total	Infant deaths under 1 year
Queenborough	1943	2,684	73	3 or 4.1%	27.2	30	11.2	3	0
	1944	2,648	70	5 or 7.1%	26.4	25	9.4	1	0
	1945	2,685	59	3 or 5.1%	21.9	38	14.2	4	0
	1946	2,901	74	5 or 6.8%	25.5	31	10.7	2	0
Sheerness	1943	12,940	262	17 or 6.5%	20.2	189	14.6	15	0
	1944	12,910	276	13 or 4.7%	21.4	151	11.7	9	1
	1945	13,280	270	30 or 11.1%	20.3	171	12.9	7	1
	1946	14,070	302	20 or 6.6%	21.4	183	13.0	17	0
Sheppey Rural District	1943	7,022	156	10 or 6.4%	22.2	76	10.8	8	2
	1944	7,217	183	9 or 4.9%	25.4	83	11.5	10	1
	1945	7,599	183	15 or 8.2%	24.1	71	9.3	1	0
	1946	8,236	184	11 or 6.0%	22.3	96	11.6	7	0
									Infant Mortality per 1,000 live Births
									41.1
									14.3
									67.8
									27.0
									57.3
									32.6
									25.9
									56.3
									51.3
									54.6
									5.5
									38.0

Infectious Diseases. Case Rate.

		Case Rate per 1,000 Population.															
		Queenborough				Sheerness				Sheppey Rural District				England and Wales			
		1943	1944	1945	1946	1943	1944	1945	1946	1943	1944	1945	1946	1943	1944	1945	1946
Typhoid Fever	...	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·01	0·01	0·01
Paratyphoid Fever	...	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·01	0·01	0·02
Cerebro Spinal Fever	...	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·00	—	0·05	0·05	0·05
Scarlet Fever	...	10·05	3·39	0·00	2·06	2·47	1·01	0·82	0·78	1·42	0·42	0·53	0·48	3·01	2·40	1·89	1·38
Whooping Cough	...	0·75	5·28	0·74	0·00	0·07	1·78	0·22	1·56	0·28	11·22	0·53	0·73	—	2·49	1·64	2·28
Diphtheria	...	0·00	0·00	0·00	0·00	0·15	0·08	0·00	0·07	0·14	0·00	0·00	0·12	0·88	0·58	0·46	0·28
Erysipelas	...	0·00	0·00	0·37	0·00	0·31	0·15	0·22	0·28	0·43	0·55	0·13	0·73	0·31	0·29	0·25	0·22
Smallpox	...	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·00	0·00
Measles	...	48·80	4·90	42·04	1·37	24·65	0·46	15·28	2·98	42·15	1·94	24·98	1·94	—	4·16	11·67	3·92
Pneumonia	...	0·37	0·00	0·37	0·34	2·08	1·01	1·13	0·57	1·99	4·85	2·76	3·03	—	0·97	0·87	0·89

Queenborough Town Council, 1946.

Mayor - ALDERMAN Mrs. E. S. WEEKES, J.P.

Deputy Mayor - ALDERMAN G. R. STEVENS.

Aldermen :

J. S. BILLS, J.P. R. J. JENNINGS, C.C.

Councillors :

Mrs. M. DOBNER.

Miss D. L. WOOD.

J. BENTLEY.

G. H. BOURNE.

E. G. DINES.

G. DUTNALL.

R. HEMINGWAY.

B. M. LUCK.

W. L. E. MASON.

A. PANKHURST.

E. THOMPSON.

R. J. WELLARD.

Town Clerk - F. MARSHALL.

Surveyor and Sanitary Inspector - W. F. DODDS.

PUBLIC HEALTH DEPARTMENT,

SHEERNESS.

June, 1947.

TO THE TOWN COUNCIL OF QUEENBOROUGH.

Mr. Mayor, Aldermen and Councillors,

I am able to report that the health of the people of Queenborough has been maintained at a high level during 1946 in spite of the many difficulties of the first post-war year.

The number of cases of infectious disease has been low and there were no cases of Diphtheria. The birth rate and death rate compare very favourably with the previous year and with the country as a whole, but in a small community it would be unwise to attach too much importance to these rates.

Housing has been the major pre-occupation in the town as throughout the whole of the country. No new houses were completed during 1946 but plans were submitted and approved by the Ministry of Health and eight houses were under construction at the end of the year.

During the war years some relaxation was allowed in respect of offensive trades but steps were taken during 1946 to re-introduce the bye-laws governing them. The willing co-operation of the factory directors before the bye-laws were submitted for approval contributed largely to the improved conditions at the end of the year.

I have to thank you and your staff for the help and encouragement which was given to me on taking over my duties.

Your obedient servant,

R. DUNCAN DEWAR,

Medical Officer of Health.

STATISTICS AND SOCIAL CONDITIONS OF THE BOROUGH OF QUEENBOROUGH.

Area (acres)	{	Land 725	}	1,441 acres
		Water 263		
		Foreshore 453		

Population estimated for mid-1946 by Registrar-General	..	2,901
Number of inhabited houses in 1946	... ..	817
Rateable Value...	... ..	£16,523
Sum represented by a Penny Rate	... ..	£66

EXTRACTS FROM VITAL STATISTICS FOR THE YEAR.

Live Births—	Total.	Male.	Female.	Birth Rate per 1,000 of
Legitimate	69	37	32	the estimated resident
Illegitimate	5	1	4	population 25.5
Total	74	38	36	
Still Births—	2	1	1	Rate per 1,000 total
				(live and still) births 26.3
Deaths—	31	20	11	Death Rate per 1,000
				of the estimated resident
				population 10.7

Deaths from puerperal causes :—

	Deaths.	Rate per 1,000 total
		(live and still) births.
Puerperal Sepsis	1	13.1
Other puerperal causes	0	0.0
Total	1	13.1

Death Rate of Infants under one year of age :—

All infants per 1,000 live births	... ..	27.0
Illegitimate infants per 1,000 illegitimate live births	... ..	0.0
Legitimate infants per 1,000 legitimate live births	... ..	29.0
Deaths from Measles (all ages) ... ..	... ..	0
Deaths from Whooping Cough (all ages)...	... ..	0
Deaths from Diarrhoea (under 2 years of age)	... ..	0

NOTES ON VITAL STATISTICS.

The population increased by 216 since 1945. Of this number, 43 are accounted for by the greater number of births than deaths.

The number of live births was 74 giving a birth rate of 25.5 which is an increase of 3.6 over the previous year and 6.4 above the rate for England and Wales. The number of deaths was 31 which is equivalent to a death rate of 10.7 per 1,000 of population.

One death occurred from puerperal causes and on investigation it was found that it could not have been reasonably foreseen or prevented. Two children under the age of one year died during the year.

The notifiable infectious diseases notified numbered 12 which included 6 cases of Scarlet Fever, 4 cases of Measles and 1 each of Pneumonia and Chicken Pox. There were no deaths from any of these diseases. There were no cases of Diphtheria. This very low number of cases of infectious disease is very satisfactory and it compares well with the country as a whole and with the adjoining areas.

Although the statistics are very satisfactory it must be remembered that in dealing with such a small population these figures do not necessarily give an accurate assessment of the public health.

HEALTH SERVICES IN THE AREA.

ANTE-NATAL CLINICS.

Provided by the Kent County Council. Clinics are held at the Welfare Hut, Whiteway Road, on the 2nd and 4th Tuesdays each month at 2 p.m. Medical Officer—Dr. Jill Hutt.

INFANT WELFARE.

Clinics are provided by the Kent County Council and are held at the Welfare Hut every Monday at 1.30 p.m. Medical Officer—Dr. Jill Hutt.

DIPHTHERIA IMMUNISATION.

Immunisation is carried out at the Infant Welfare Clinics and also by general practitioners. Payment is made for these services by arrangement with the Kent County Council.

By the end of 1946 there were 129 children under 5 years of age and 212 children aged 5 to 14 who had been immunised. These figures are both 45% of their age groups.

FEVER HOSPITAL.

Keycol Hill Isolation Hospital, under the management of the Sittingbourne and Milton Joint Hospital Board, normally takes all infectious cases requiring hospital treatment and special arrangements exist for the treatment of smallpox and ophthalmia neonatorum. Measles and whooping cough are not usually removed to hospital. Six cases of infectious disease were admitted to the hospital during the year.

MIDWIFERY AND HOME NURSING.

Nurse Deegan of 55 Harold Street, Queenborough, efficiently carries out these duties for the Queenborough District Nursing Association. The Kent County Council is the Supervising Authority.

HOME HELPS.

A Home Help Scheme provided by the County Council is in operation in the Borough.

DAY NURSERY.

The war-time day nursery established at the Schoolroom, Bethel Chapel, continued to provide day-time accommodation for children below school age. The nursery was administered by the Kent County Council and provided places for 30 children. During 1946 the number of children using the nursery was on the average only about half that for which the nursery could provide. The nursery was discontinued on 31st December 1946.

HOSPITAL.

Provision is made for in-patient treatment of medical, surgical and maternity cases at the County Hospital, Minster.

Out-patient sessions are held at the following times.

Monday, 2 p.m.	Surgical	Dr. P. Berry
Monday, 2 p.m.	Ante-Natal	Dr. F. Schmelz
Tuesday, 2 p.m.	Medical	Dr. D. H. Mills
Wednesday, 2 p.m.	Gynaecological	Dr. F. Schmelz
Thursday, 2 p.m.	Surgical	Dr. W. L. Wills

In addition, Mr. J. H. Mayer attends at the Orthopaedic Clinic on the second Wednesday of each month at 2 p.m. and Mr. E. P. Gill attends the Ear, Nose and Throat Clinic at the hospital on the first, third and fifth Monday of each month at 10 a.m. X-ray facilities are also available at the hospital.

AMBULANCE SERVICE.

The Borough owns and maintains an Ambulance and part-time drivers and attendants from the St. John Ambulance Brigade give their services voluntarily.

PATHOLOGICAL SERVICE.

The County Laboratory is situated at the County Hall, Maidstone, and provides a free and comprehensive service for medical practitioners. Routine samples of water and milk supplies are sent to the Laboratory for examination and assistance is also available in the event of epidemics.

TUBERCULOSIS.

The Visiting Tuberculosis Officer is Dr. S. Roy C. Price and the Clinic is held at Granville Villa, Granville Road, Sheerness, on the first, third and fifth Thursdays of the month from 12 noon until 2 p.m.

VENEREAL DISEASE.

The Visiting Venereologist is Dr. Ockwell and the Clinic is held at 61 Alma Road, Sheerness, men attending from 10—11 a.m. and women from 11—12 noon every Saturday.

SCHOOL HEALTH SERVICE.

This service is under the control of Dr. A. Elliott, School Medical Officer for the County.

All schools are visited twice a year and during their school life, children are examined four times; if any diseases or defects requiring observation or treatment are detected, then further examinations are made at subsequent visits.

The Kent Education Committee provides a service of specialists for the treatment of teeth, eye and ear, nose and throat, orthopaedic cases and psychological cases, while minor ailments are dealt with at the School Clinic, Granville Villa, Granville Road, Sheerness.

SANITARY CIRCUMSTANCES OF THE AREA.

WATER.

The town's water is obtained from two deep boreholes on Rushenden Hill and 799 out of a total of 817 dwelling-houses have a direct piped supply. The population so supplied numbers 2,900. The remaining 18 houses have a piped supply into the houses from water which is obtained from the bore owned and operated by the Southern Railway Co. A 3" main connects with the distribution system of the Sheppey Water Company for use in emergencies.

The average daily consumption of water is approximately 100,000 gallons, of which one-third is consumed by industrial concerns. This is equivalent to a consumption of 34.5 gallons per head of the population for all purposes.

The quantity of water would thus appear to be reasonably adequate but owing to difficulties in distribution and the large quantity which is taken for industrial purposes, the pressure of water in some parts of the town is extremely low during the morning and afternoon and in effect this amounts to an intermittent supply in a limited area.

The bacteriological examinations are summarised below :

Source of supply	Number of samples taken	Number of organisms per cc capable of growth on agar at			
		37°C		22°C	
		Average of all samples	Highest in any sample	Average of all samples	Highest in any sample
Rushenden Hill Pumping Station Treated	10	0	0	17	56

No typical *B. coli* were found in any sample.

No samples were taken of water before chlorination and no samples were taken of the water from the Southern Railway Company's bore.

Chemical analysis of the Rushenden Hill Supply is as follows :

	Parts per 100,000
Total solid residue	63.5
Chlorine	5.6
Free Ammonia	0.022
Albuminoid Ammonia	0.000
Nitrogen as Nitrates	—
Oxygen absorbed, $\frac{1}{4}$ hour at 80° F. ...	0.02
" 4 hours at 80° F. ...	0.04
Nitrites	Trace

Remarks: The water is of good organic quality.

The hardness of the water is not mentioned in this report but a previous report gives the following figures :

Permanent hardness 17.2 Temporary hardness 20.8
Total hardness 38.0

This is excessively hard and would in most areas be considered to be quite unfit for domestic use. It would seem that the possibility of introducing a softening process might well be investigated.

There is no evidence that the water has any plumbo-solvent action.

SEWAGE DISPOSAL.

Sewage collects by gravity into two main sewers each one of which has a tide lock storage tank. From the tanks the sewage escapes by gravity to the sea. One outfall is at the Town Quay and the other is at the Chalk Wharf. The sewage is not treated in any way before its discharge into the sea.

No extension of the drainage system was made during 1946.

Number of W.C's into drainage system ...	882
Number of W.C's into cesspools ...	18

HOUSING.

The programme of new housing in Queenborough was somewhat delayed in the early part of the year because the plans for the erection of new houses in Rushenden were not approved by the Minister of Health. Later however, plans for the erection of 28 houses in Borough Road were approved and by the end of 1946 eight of these houses were under construction.

No houses were completed or under construction by private enterprise during the year. No temporary houses were erected but conversion was made of requisitioned properties to provide six flats for temporary housing.

SANITARY INSPECTION OF THE AREA.

Number of visits of all kinds made by the Inspector 236

Notices served :—

Statutory	2
Informal	65

NUISANCES AND DEFECTS REMEDIED DURING THE YEAR.

Defective sanitary accommodation	...	2
Defective drainage	... ..	3
Offensive accumulations	... ..	2
Refuse receptacles	... ..	14
Dampness	... ..	9
Roofs and rain water pipes	... ..	1
Floors	... ..	10
Walls and ceilings	... ..	4
Windows and ventilation	... ..	6
Baths, lavatory basins and sinks	... ..	1
Water supplies	... ..	8
Miscellaneous	... ..	1

PREMISES OR OCCUPATIONS CONTROLLED BY BYELAWS OR REGULATIONS.

	No. in District	No. of visits in 1946	No. of faults & defects found	No. of faults & defects remedied
Dairies	3	18	—	—
Food preparing places	1	4	—	—
Offensive Trades	1	56	4	4
Factories	9	36	—	—

UNSOOUND FOOD.

The amount of food condemned during the year was approximately 2 cwt.

DISINFECTION AND DISINFESTATION.

Number of rooms disinfected after infectious disease	6
Number of rooms disinfested for verminous conditions	Nil

MILK SUPPLY.

Number of producers	...	2
Number of producer retailers	...	1
Number of retailers	...	4

MALARIA.

Mosquitoes continue to cause a considerable amount of discomfort in the area. Ditches, dykes and standing water were sprayed with oil at regular intervals in order to reduce the number of mosquitoes so far as possible, but this method of control involves considerable labour and is rarely completely effective.

Some of the mosquitoes breeding in the district are capable of transmitting malaria but no cases were notified during 1946.

VACCINATION.

Dr. H. A. Madwar, the Public Vaccinator, has kindly supplied me with the following figures:—

Primary vaccinations during 1946	...	38
Re-vaccinations during 1946	...	Nil

Vital Statistics for 1946.
Compared with 1945, 1944, 1943, 1942.

	1942	1943	1944	1945	1946
Death-rate per 1,000 of population .	7·7	11·2	9·4	14·2	10·7
Infant Mortality per 1,000 births ..	32·3	41·1	14·3	67·8	27·0
Birth-rate per 1,000 of population ..	22·7	27·2	26·4	21·9	25·5
Total Infectious Diseases, excluding Measles and Tuberculosis ..	30	32	23	4	8
Cases of Smallpox	0	0	0	0	0
Cases of Enteric Fever	0	0	0	0	0
Cases of Diphtheria	0	0	0	0	0
Cases of Scarlet Fever	26	27	9	0	6
Cases of Tuberculosis notified (all forms)	3	6	1	2	1
Deaths from Tuberculosis	1	3	4	4	3
Cases of Malaria	0	0	0	0	0

INFANT MORTALITY.

Causes of Deaths of Infants under one year of age.

Month.	Sex.	Age.	Cause.
May	Male	3 months	Peritonitis Intussusception.
December	Female	1 day	Prematurity. Toxaemia of pregnancy of mother.

CAUSES OF AND AGES AT DEATH DURING THE YEAR, 1946.

MALES.

Causes of Death.	Net deaths at the subjoined ages of "Residents" whether occurring within or without the District.								
	All ages	Under 1 year	1 and under 2 years	2 and under 5 years	5 and under 15 years	15 and under 25 years	25 and under 45 years	45 and under 65 years	65 and upwards
1 Typhoid & parat. fevers ..	0	0	0	0	0	0	0	0	0
2 Cerebro-spinal Fever ...	1	0	1	0	0	0	0	0	0
3 Scarlet Fever ...	0	0	0	0	0	0	0	0	0
4 Whooping Cough ...	0	0	0	0	0	0	0	0	0
5 Diphtheria ...	0	0	0	0	0	0	0	0	0
6 Tuberculosis of the Respira- tory System ..	2	0	0	0	0	0	0	0	2
7 Other Tuberculous Diseases	0	0	0	0	0	0	0	0	0
8 Syphilitic diseases ..	2	0	0	0	0	0	0	1	1
9 Influenza ...	0	0	0	0	0	0	0	0	0
10 Measles ...	0	0	0	0	0	0	0	0	0
11 Ac. polio-myel & polio-enceph	0	0	0	0	0	0	0	0	0
12 Ac. inf: encephalitis ..	0	0	0	0	0	0	0	0	0
13 Cancer, b: cav: & oesoph (M) uterus (F) ...	0	0	0	0	0	0	0	0	0
14 Cancer, stomach & duodenum	2	0	0	0	0	0	0	1	1
15 Cancer, breast ...	0	0	0	0	0	0	0	0	0
16 Cancer, all other sites ..	1	0	0	0	0	0	0	1	0
17 Diabetes ...	0	0	0	0	0	0	0	0	0
18 Intra-cranial vascular lesions	3	0	0	0	0	0	0	1	2
19 Heart Disease ...	5	0	0	0	0	0	0	0	5
20 Other circulatory diseases ...	0	0	0	0	0	0	0	0	0
21 Bronchitis ...	2	0	0	0	0	0	0	0	2
22 Pneumonia (all forms) ...	0	0	0	0	0	0	0	0	0
23 Other respiratory diseases ...	0	0	0	0	0	0	0	0	0
24 Ulcer, stomach or duodenum	0	0	0	0	0	0	0	0	0
25 Diarrhœa (under 2 years) ...	0	0	0	0	0	0	0	0	0
26 Appendicitis ...	0	0	0	0	0	0	0	0	0
27 Other digestive diseases ..	2	1	0	1	0	0	0	0	0
28 Nephritis ...	0	0	0	0	0	0	0	0	0
29 Puerperal & post-abor. sepsis	0	0	0	0	0	0	0	0	0
30 Other maternal causes ...	0	0	0	0	0	0	0	0	0
31 Premature birth ..	0	0	0	0	0	0	0	0	0
32 Con: mal: birth injury, infant: dis: ...	0	0	0	0	0	0	0	0	0
33 Suicide ...	0	0	0	0	0	0	0	0	0
34 Road traffic accidents ...	0	0	0	0	0	0	0	0	0
35 Other violent causes ...	0	0	0	0	0	0	0	0	0
36 All other causes ...	0	0	0	0	0	0	0	0	0
All causes ..	20	1	1	1	0	0	0	4	13

CAUSES OF AND AGES AT DEATH DURING THE YEAR, 1946.
FEMALES.

Causes of Death.	Net deaths at the subjoined ages of "Residents" whether occurring within or without the District.								
	All ages	Under 1 year	1 and under 2 years	2 and under 5 years	5 and under 15 years	15 and under 25 years	25 and under 45 years	45 and under 65 years	65 and upwards
1 Typhoid & parat. fevers ..	0	0	0	0	0	0	0	0	0
2 Cerebro-spinal Fever	0	0	0	0	0	0	0	0	0
3 Scarlet Fever ...	0	0	0	0	0	0	0	0	0
4 Whooping Cough	0	0	0	0	0	0	0	0	0
5 Diphtheria ...	0	0	0	0	0	0	0	0	0
6 Tuberculosis of the Respira- tory System ...	1	0	0	0	0	1	0	0	0
7 Other Tuberculous Diseases	0	0	0	0	0	0	0	0	0
8 Syphilitic diseases ...	0	0	0	0	0	0	0	0	0
9 Influenza ...	0	0	0	0	0	0	0	0	0
10 Measles ...	0	0	0	0	0	0	0	0	0
11 Ac. polio-myel & polio-enceph	0	0	0	0	0	0	0	0	0
12 Ac. inf: encephalitis ...	0	0	0	0	0	0	0	0	0
13 Cancer, b: cav: & oesoph (M) uterus (F) ...	0	0	0	0	0	0	0	0	0
14 Cancer, stomach & duodenum	0	0	0	0	0	0	0	0	0
15 Cancer, breast ...	0	0	0	0	0	0	0	0	0
16 Cancer, all other sites ...	1	0	0	0	0	0	0	0	1
17 Diabetes ...	0	0	0	0	0	0	0	0	0
18 Intra-cranial vascular lesions	1	0	0	0	0	0	0	0	1
19 Heart Disease ...	4	0	0	0	0	0	0	1	3
20 Other circulatory diseases ...	1	0	0	0	0	0	0	0	1
21 Bronchitis ...	1	0	0	0	0	0	0	0	1
22 Pneumonia (all forms) ...	0	0	0	0	0	0	0	0	0
23 Other respiratory diseases ...	0	0	0	0	0	0	0	0	0
24 Ulcer, stomach or duodenum	0	0	0	0	0	0	0	0	0
25 Diarrhœa (under 2 years) ...	0	0	0	0	0	0	0	0	0
26 Appendicitis ...	0	0	0	0	0	0	0	0	0
27 Other digestive diseases ...	0	0	0	0	0	0	0	0	0
28 Nephritis ...	0	0	0	0	0	0	0	0	0
29 Puerperal & post-abor. sepsis	1	0	0	0	0	0	1	0	0
30 Other maternal causes ...	0	0	0	0	0	0	0	0	0
31 Premature birth ...	0	0	0	0	0	0	0	0	0
32 Con: mal: birth injury, infant: dis: ...	1	1	0	0	0	0	0	0	0
33 Suicide ...	0	0	0	0	0	0	0	0	0
34 Road traffic accidents ...	0	0	0	0	0	0	0	0	0
35 Other violent causes ...	0	0	0	0	0	0	0	0	0
36 All other causes ...	0	0	0	0	0	0	0	0	0
All causes ...	11	1	0	0	0	1	1	1	7

Infectious Diseases (other than Tuberculosis) during the year 1946.

Disease	Notified			Number Removed to Hospital	Total Deaths Registered
	Total	Males	Females		
Smallpox	0	0	0	0	0
Diphtheria	0	0	0	0	0
Scarlet Fever	6	2	4	6	0
Typhoid & Paratyphoid	0	0	0	0	0
Dysentery	0	0	0	0	0
Puerperal Pyrexia	0	0	0	0	0
Malaria	0	0	0	0	0
Erysipelas	0	0	0	0	0
Ophthalmia Neonatorum	0	0	0	0	0
Pneumonia	1	0	1	0	0
Cerebro-spinal Fever	0	0	0	0	1*
Acute Poliomyelitis	0	0	0	0	0
Measles	4	1	3	0	0
Whooping Cough	0	0	0	0	0
Chicken Pox	1	1	0	0	0
Totals ..	12	4	8	6	1

* Transferable Death. Case not notified in this district.

Age Distribution of Infectious Diseases.

Disease	At all ages	At ages—years											
		Under 1 year	1 to 2 years	2 to 3 years	3 to 4 years	4 to 5 years	5 to 10 years	10 to 15 years	15 to 20 years	20 to 35 years	35 to 45 years	45 to 65 years	65 & upwards
Smallpox	0	0	0	0	0	0	0	0	0	0	0	0	0
Diphtheria	0	0	0	0	0	0	0	0	0	0	0	0	0
Scarlet Fever	6	0	2	1	0	1	0	2	0	0	0	0	0
Typhoid & Paratyphoid	0	0	0	0	0	0	0	0	0	0	0	0	0
Dysentery	0	0	0	0	0	0	0	0	0	0	0	0	0
Puerperal Pyrexia	0	0	0	0	0	0	0	0	0	0	0	0	0
Malaria	0	0	0	0	0	0	0	0	0	0	0	0	0
Erysipelas	0	0	0	0	0	0	0	0	0	0	0	0	0
Ophthalmia Neonatorum	0	0	0	0	0	0	0	0	0	0	0	0	0
Pneumonia	1	0	0	0	0	0	0	0	0	0	0	0	1
Cerebro-spinal Fever	0	0	0	0	0	0	0	0	0	0	0	0	0
Acute Poliomyelitis	0	0	0	0	0	0	0	0	0	0	0	0	0
Measles	4	1	2	0	1	0	0	0	0	0	0	0	0
Whooping Cough	0	0	0	0	0	0	0	0	0	0	0	0	0
Chicken Pox	1	0	0	0	0	0	1	0	0	0	0	0	0
Totals	12	1	4	1	1	1	1	2	0	0	0	0	1

TUBERCULOSIS.

Age	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M	F	M	F	M	F	M	F
Under 1 year ..	0	0	0	0	0	0	0	0
1 to 5 years ...	0	0	0	0	0	0	0	0
5 to 15 years ...	0	0	0	0	0	0	0	0
15 to 25 years ...	0	0	0	0	0	1	0	0
25 to 35 years ...	0	0	0	0	0	0	0	0
35 to 45 years ...	0	0	0	0	0	0	0	0
45 to 55 years .	1	0	0	0	0	0	0	0
55 to 65 years ..	0	0	0	0	0	0	0	0
65 and upwards ..	0	0	0	0	2	0	0	0
Totals ...	1	0	0	0	2	1	0	0

Sheerness Urban District Council, 1946.

Chairman : Mrs. A. DURANT, J.P.
 Vice-Chairman : A. G. COATS, J.P.
 Councillor Mrs. E. TILTMAN.
 „ R. J. DAVIE.
 „ S. J. McCOURT.
 „ Rev. A. B. MORLEY.
 „ H. E. MORRIS, J.P.
 „ P. J. PITMAN.
 „ C. F. SADDLETON.
 „ A. F. STANDEN.
 „ J. G. WARD.

Health, Maternity, and Infant Welfare Committee :

Chairman : A. G. COATS, J.P.
 Councillor Mrs. A. DURANT, J.P.
 „ Mrs. E. TILTMAN.
 „ P. J. PITMAN.
 „ H. E. MORRIS, J.P.

Members co-opted for the purpose of Maternity and Infant Welfare.

Mrs. HARFOOT.
 Mrs. STOCK.

Clerk to the Council : H. V. STALLON, Solicitor.
 Surveyor : K. SCOTT, M.Inst., M. & Cy.E., A.M.I.S.E.
 Sanitary Inspector : D. E. JACOB, A.R.San.I., M.S.I.A.
 Superintendent of Infant Welfare and Health Visitor :
 Miss F. G. JONES, S.R.N., S.C.M.

PUBLIC HEALTH DEPARTMENT,
TRINITY ROAD,
SHEERNESS.

June, 1947.

*TO THE CHAIRMAN AND COUNCILLORS OF THE
SHEERNESS URBAN DISTRICT COUNCIL.*

MR. CHAIRMAN, LADIES AND GENTLEMEN,

The year 1946 has been a year of reconstruction in which a return has been made to peace-time practice, so far as circumstances have allowed.

Some members of the staff who had served in the Forces have returned and others who carried on throughout the war have retired. In particular I would mention the retirement of Mr. W. J. Terrill who was appointed as your Sanitary Inspector in September 1927. Mr. Terrill did a great deal to improve the sanitary condition of the town during his nineteen years service and was responsible for the maintenance of a very high standard during the difficult years of the war. He was succeeded by Mr. D. E. Jacob who took up his appointment on 9th December, 1946.

Sheerness has always been a dockyard town and although much has been done to render it attractive as a seaside resort, the wealth of the town does and will continue to depend on the employment of its inhabitants in H.M. Dockyard. Dependence on the dockyard is not limited to Sheerness only, for the town is the main shopping and amusement centre for the whole Island.

The area of the town is very limited and it is becoming apparent that the building land which still remains available is unlikely to satisfy the housing needs of the area in the future. The Mile Town and Blue Town areas contained many houses which were below a reasonable standard even before the war, and with the natural dilapidation which has occurred during the past seven years, and the impossibility of continuing the necessary maintenance during this time, the number of houses which should be demolished has increased a great deal.

The programme of new housing has been pursued energetically and progress during the year was very satisfactory considering the shortage of labour and materials. A points system for the selection of applicants was introduced in September and has on the whole proved satisfactory, although it has on several occasions demonstrated the impossibility of reducing human problems to a simple mathematical formula.

The water supply has given rise to much concern. Fuller particulars are given in this report. It is hoped that the approval of the Ministry of Health will be obtained for the acquisition of sufficient additional or alternative supplies of water to prevent the dangers and discomforts which exist at present.

The numbers of cases of infectious diseases has remained at a low level. Immunisation against Diphtheria has been vigorously continued and vaccination against Whooping Cough has been commenced. Proof of the efficiency of the Whooping Cough vaccine is still not available, but it is confidently hoped that the campaign which has now been started will materially reduce the ill health which has been caused by this disease in the town.

The general health of the population has been maintained in spite of the continued limitation of food supplies, and the large number of persons still living under unsatisfactory home conditions.

The work of the ante-natal clinic has greatly increased both on account of the greater number of children being born and by reasons of a wider appreciation of the services which are available to the public.

The work of the Infant Welfare clinics has also shown a large increase and whilst this is very satisfactory it must be appreciated that the time which the Health Visitor can allow for home visiting is correspondingly curtailed.

I wish to express my thanks to the Council and to all the members of the staff for the consideration and help which has been given to me.

Your obedient servant,

R. DUNCAN DEWAR,

Medical Officer of Health.

STATISTICS AND SOCIAL CONDITIONS OF THE URBAN DISTRICT OF SHEERNESS.

Area (acres) ...	...	...	...	...	...	961
Population estimated for mid-1946 by Registrar-General	...	...	...	...	...	14,070
Number of inhabited houses	...	...	...	...	...	4,100
Rateable value	...	...	...	...	...	£105,770
Sum represented by a Penny Rate	...	...	...	...	...	£415

EXTRACTS FROM VITAL STATISTICS FOR THE YEAR.

Live Births—	Total.	Male.	Female.	Birth Rate per 1,000 of		
Legitimate	282	155	127	the estimated resident		
Illegitimate	20	7	13	population ...	...	21.4
Total	302	162	140			
Still Births—	2	1	1	Rate per 1,000 total		
				(live and still) births...		6.6
Deaths—	183	95	88	Death Rate per 1,000		
				of the estimated resident		
				population ...	...	13.0

Deaths from puerperal causes :—

	Deaths.	Rate per 1,000 total (live and still) births.
Puerperal Sepsis ...	0	0.00
Other Puerperal causes ...	0	0.00
Total ...	0	0.00

Death Rate of Infants under one year of age :—

All infants per 1,000 live births	...	...	...	56.3
Illegitimate infants per 1,000 illegitimate live births	...	...	...	0.0
Legitimate infants per 1,000 legitimate live births	...	...	...	60.3
Deaths from Measles (all ages) ...	...	...	...	0
Deaths from Whooping Cough (all ages)...	...	...	...	0
Deaths from Diarrhoea and Enteritis (under 2 years)	...	...	...	0

NOTES ON VITAL STATISTICS.

The population as estimated by the Registrar-General for mid-1946 was 14,070. This is an increase of 790 over the estimated figure for 1945 but it is still about 2,300 below the pre-war number.

The total number of live births registered during the year was 302 which is equivalent to a birth rate of 21.4 per 1,000 of the population. This rate is 1.1 higher than the rate for 1945 and 2.3 higher than the rate for England and Wales. Illegitimate births numbered 20 or 6.6% of the live births. There were only 2 still-births, giving a rate of 0.14 per 1,000 of the population, as compared with 0.53 for England and Wales.

The number of deaths registered was 183 which gives a death rate of 13.0 per 1,000 of population. This is 0.1 higher than the figure for 1945 and 1.5 higher than the rate for England and Wales.

There were no deaths from puerperal causes. The number of deaths of infants under one year of age was 17, giving an infant mortality rate of 56.3 per 1,000 live births. This is more than twice the rate for the previous year, and whilst this increase is to be deplored, it must be remembered that the infantile mortality rate is a notoriously variable and unreliable guide in small communities. Of the 17 infant deaths, 12 occurred during the first month of life.

The number of cases of infectious diseases has not materially altered and there was no widespread epidemic of any disease. No deaths occurred from any of the notifiable infectious diseases. There was one case of Diphtheria. There was a slight increase in the number of notifications of tuberculosis, there being 15 new cases of which 14 were pulmonary, as compared with a total of 13 in 1945, and there were 7 deaths from pulmonary tuberculosis as compared with 5 deaths in the previous year.

ANTE-NATAL CLINICS.

The clinic is held at the Infant Welfare Centre, Marine Parade. During the first quarter of the year the clinics were held every month, during the second quarter this was increased to every fortnight, and in the latter half of the year clinics were held every week.

The number of women attending was 211 and the total attendances was 655. The figures for 1945 were 113 and 213 respectively.

One of the midwives from the Lethbridge Nursing Society attends each ante-natal clinic to ensure that the midwives are kept fully informed of the condition of the expectant mothers whom they will attend later. During the latter part of the year by arrangement with the County Laboratory it became a routine to take blood samples from all expectant mothers for blood grouping, for the presence of the Rhesus factor and for the test for syphilis.

Under arrangements with the Kent County Council, expectant and nursing mothers can receive dental treatment when necessary from the County Dental Officer.

The increase in attendances at the clinic is very satisfactory. Approximately 70% of all expectant mothers in the town attended the clinic during the year.

The number of births registerable in Sheerness during the year was 302, an increase of 32 over 1945. Of these births 164 occurred in hospital and 138 were born at home. Endeavours have been made to limit the number of maternity cases sent to hospital on account of the shortage of hospital accommodation and of nursing staff, and cases are only admitted because of the need for special treatment which cannot be given at home or because of unsuitable home conditions. More than three-quarters of the hospital cases or 40% of the total births were admitted on account of unsuitable home conditions which include overcrowding and lack of sanitary conveniences. Many of the mothers were young persons married during or since the war who were living in lodgings, but in spite of this it would appear that the housing conditions, as shown by the number of cases admitted to hospital, are not such as to cause complacency.

INFANT WELFARE.

Infant Welfare Clinics are held every Tuesday and every Friday at the Welfare Centre, Marine Parade. A Toddlers clinic is held on the first Wednesday of each month.

The clinics are intended to ensure that advice on health matters and on the general management of children is readily available to all parents. Defects which in some cases may not have been noticed or appreciated by the parents, are discovered at the routine examinations, and the parents advised as to how treatment may be obtained. This is especially important in orthopaedic cases and where there is a defect of vision or hearing, as early treatment is often essential. No medical treatment is given at the clinics, sick children are excluded and parents are advised to consult their own doctors. The records of progress are of considerable help to the Health Visitor who is enabled to keep a closer check on the progress of an infant than is possible by her visits to a home alone.

Artificial food, cod liver oil etc., are provided at cost price at the clinic and may be given free of charge in necessitous cases, but they have only been supplied free in an insignificant number of cases during the year.

The clinic is also used for propaganda work in the immunisation against Diphtheria and Whooping Cough, the avoidance of home accidents, the formation of healthy habits of both parents and children and in health education generally.

It is natural that advice is more often sought by inexperienced mothers and that by the provision of infant foods at cost price the clinic is more popular with the mothers of young babies than with the parents of older children. The number of children under one year of age who attended the clinic for the first time in 1946 was 235. The total number of children attending during the year was 734 and the total number of attendances was 8033. Thus approximately 75% of all children in the town under the age of one year and more than 60% of all children under 5 years attended the clinic at least once during the year.

This large and very satisfactory increase in the attendances at the clinics is due to the enthusiasm of Miss Jones whose good work has made the clinic such a well recognised source of help and advice, and to the ladies whose unstinted and entirely voluntary efforts have

made the greatly increased work of the clinic possible. These ladies are Conn. Mrs. Tiltman, Mesdames Harfoot, Stock, Broad, Dangerfield, Hicks, Knowler, Redcliffe, Tyack and Wellard.

Mrs. Simmons, the caretaker, must also be mentioned for the conscientious manner in which she has done her work.

IMMUNISATION.

DIPHTHERIA :

The programme of immunisation against Diphtheria has been continued throughout the year. The benefits are fully known and appreciated and it is satisfying to record that only one case of Diphtheria occurred in Sheerness during 1946.

Of the children under 5 years of age 592 or approximately 50% had completed a course of immunisation as had 58% of all children below the age of 15 years. It must be remembered that immunisation is not satisfactory in the early months of life and is not usually commenced until the age of 9—12 months, also the above figures do not include those children who had received one injection only. Owing to unforeseen circumstances the immunisation of children and the giving of re-inforcing doses at the schools was delayed but some progress was made during December.

WHOOPING COUGH :

Immunisation against Whooping Cough was started in Sheerness in September 1946. Immunisation is carried out at the same time and place as for Diphtheria and is available free to all Sheerness children below school age. The prophylactic used is Glaxo Alum Precipitated Whooping Cough Vaccine and three doses are given at monthly intervals. By December 31st 1946, 230 children had received one or more doses.

It is extremely difficult to prove beyond doubt the efficiency of Whooping Cough vaccination. To do so it is necessary to have two groups of children who are identical in respect of age, sex, home conditions, exposure to infection, medical treatment etc. One group must be protected by vaccination whilst the other group is unprotected and full medical records must be kept over a long period. It will be appreciated that in a trial of this kind there are many practical difficulties. The results of trials in America are generally favourable, but these have not yet been sufficiently confirmed in this country. Trials are at present being carried out in London and the provinces under the direction of the Medical Research Council and it is anticipated that their results will be published in about two years.

In favour of Whooping Cough vaccination it may be said that during the early years of life, whooping cough causes more deaths and probably causes more persistent ill health than any other infectious disease. On the other hand vaccination is normally carried out at an earlier age than diphtheria immunisation and it is apt to cause more discomfort to the child. Consequently if it should prove ineffective the combination of circumstances might well cause diphtheria immunisation to be regarded with some disfavour and this would be deplorable.

For these and other reasons the Ministry of Health have not given a universal approval for whooping cough vaccination, but they have

approved it in a limited number of areas of which Sheerness is one. In Sheerness no control group is used and it is therefore unlikely that any statistical proof of the efficiency of whooping cough vaccination will be obtainable for a considerable period.

It is anticipated that when the Welfare responsibilities of the town are taken over by the Kent County Council under the National Health Service Act of 1946, permission will be given to continue whooping cough vaccination on the present lines.

HOME HELPS.

A Home Helps Scheme was started in Sheerness during December 1946. The object is to provide assistance for women during the period immediately following their confinement so that they may be encouraged to have their babies at home rather than in the hospitals. The home helps do all the shopping and all the normal domestic duties, but take no part in any medical work. The scheme has been started on the general line suggested by the Ministry of Health and the Kent County Council but has been modified to suit local needs and conditions. During the short period up to the end of the year, a panel of 9 part time home helps had been formed and they had been used in 7 cases.

It is hoped to be able to extend the service to cases of general sickness in addition to maternity cases in the future.

FEVER HOSPITAL.

Keycol Hill Isolation Hospital, under the management of the Sittingbourne and Milton Joint Hospital Board, normally takes all infectious cases requiring hospital treatment and special arrangements exist for the treatment of smallpox and ophthalmia neonatorum. Measles and whooping cough are not usually removed to hospital. 13 cases of infectious disease were admitted to the hospital during the year.

MIDWIFERY AND HOME NURSING.

This service is provided very efficiently by the Lethbridge Sick Nursing Society, 322 High Street, Sheerness.

The Kent County Council is the supervising authority for midwives.

DAY NURSERY.

The Sheerness War-time Day Nursery was opened in August 1942. Provision was made to accommodate 30 children below the age of 2 years and 50 children between 2 and 5 years of age. The Nursery was always fully appreciated by the people of Sheerness and during January 1946 there were 72 children being cared for each day.

Until the end of April 1946 the expenses incurred in the running of the Nursery were paid by the Government, but after this time the grant was reduced and the additional expenditure was met by equal contributions from the Sheerness Urban District Council and the Kent County Council. On 1st September 1946 the whole of the administration was taken over by the Kent Education Committee and the Nursery has since been run as a Nursery Class attached to the Church of

England Primary Infants' School. The portion of the Nursery which had been used to provide for the children under 2 years of age was closed at this time.

HOSPITAL.

Provision is made for in-patient treatment of medical, surgical and maternity cases at the County Hospital, Minster.

Out-patient sessions are held at the following times.

Monday, 2 p.m.	Surgical	Dr. P. Berry
Monday, 2 p.m.	Ante-Natal	Dr. F. Schmelz
Tuesday, 2 p.m.	Medical	Dr. D. H. Mills
Wednesday, 2 p.m.	Gynaecological	Dr. F. Schmelz
Thursday, 2 p.m.	Surgical	Dr. W. L. Wills

In addition, Mr. J. H. Mayer attends at the Orthopaedic Clinic on the second Wednesday of each month at 2 p.m. and Mr. E. P. Gill attends the Ear, Nose and Throat Clinic at the hospital on the first, third and fifth Monday of each month at 10 a.m. X-ray facilities are also available at the hospital.

AMBULANCE SERVICE.

There are two ambulances stationed at Trinity Road, Sheerness, one owned by the Sheerness U.D.C. and the other by the Sheerness Division of the St. John Ambulance Brigade. Both ambulances are staffed by members of the S.J.A.B. and a very efficient service is provided not only for Sheerness but also for cases from the Sheppey Rural District.

PATHOLOGICAL SERVICE.

The County Laboratory is situated at the County Hall, Maidstone, and provides a free and comprehensive service for medical practitioners. Routine samples of water and milk supplies are sent to the Laboratory for examination and assistance is also available in the event of epidemics.

TUBERCULOSIS.

The Visiting Tuberculosis Officer is Dr. S. Roy C. Price and the Clinic is held at Granville Villa, Granville Road, Sheerness, on the first, third and fifth Thursdays of the month from 12 noon until 2 p.m.

VENEREAL DISEASE.

The Visiting Venereologist is Dr. Ockwell and the Clinic is held at 61 Alma Road, Sheerness, men attending from 10—11 a.m. and women from 11—12 noon every Saturday.

SCHOOL HEALTH SERVICE.

This service is under the control of Dr. A. Elliott, School Medical Officer for the County.

All schools are visited twice a year and during their school life, children are examined four times; if any diseases or defects requiring observation or treatment are detected, then further examinations are made at subsequent visits.

The Kent Education Committee provides a service of specialists for the treatment of teeth, eye and ear, nose and throat, orthopaedic cases and psychological cases, while minor ailments are dealt with at the School Clinic, Granville Villa, Granville Road, Sheerness.

WATER.

The town's water is obtained from deep boreholes at the Trinity Road and Sheerness East pumping stations. Additional water when required is obtained from the Sheppey Water Company. Of the houses in Sheerness about 95% have a piped supply into the houses and the remainder are supplied by standpipe. The total population supplied numbers 14,070. There is no source of water for domestic use other than the piped supply. In general the areas of Blue Town and Mile Town are supplied from the Trinity Road bore and Marine Town and the new housing estates are supplied from the bore at Sheerness East, but connecting mains allow the alteration of the area of supply when necessary. All water is chlorinated before distribution but a breakdown in chlorination occurred at both pumping stations for short periods of less than a week owing to delay in delivery of chlorine cylinders.

The quality of the water has been good. Bacteriological examinations are now carried out at monthly intervals by arrangements with the County Laboratory at Maidstone. The reports of examinations are shown below.

Source of supply	Number of samples taken	Number of organisms per cc capable of growth on agar at			
		37°C		22°C	
		Average of all samples	Highest in any sample	Average of all samples	Highest in any sample
Trinity Road	9	5	18	8	36
Untreated					
Trinity Road	16	3	35	13	75
Treated					
Sheerness East	5	7	32	13	53
Untreated					
Sheerness East	15	1	14	5	45
Treated					

The reports on three chemical analyses, two from Trinity Road and one from Sheerness East are given below.

	Sheerness East.	Trinity Road.
	27/11/46	27/11/46 12/7/46
	Parts per 100,000	
Total solid residue	67.0	62.5 63.0
Chlorine	5.2	6.5 6.6
Free Ammonia	0.08	0.026 0.0
Albuminoid Ammonia	0.002	0.002 0.0
Nitrogen as Nitrates	—	— 0.1
Oxygen absorbed, $\frac{1}{4}$ hour at 80°F.	0.02	0.04 0.014
" " 4 hours at 80°F.	0.05	0.07 0.028
Nitrites	9	Present Present
Total Hardness		15.2
Temporary "		10.4
Permanent "		4.8

Remarks: Sheerness East—The water is of good organic quality.

Trinity Road 27/11/46—The water is of rather less satisfactory organic quality than hitherto.

Trinity Road 12/7/46—The water is of good organic quality.

The plumbo-solvent action of the water appears to be negligible.

The quantity of the water leaves a great deal to be desired. Even with the additional water which it is practicable to obtain from the Sheppey Water Company it is not possible to give a 24 hours supply. The average daily consumption of water for all purposes was 435,000 gallons or about 31 gallons per person. The reservoir at Southdown Road, Sheerness East, provides a reserve of 1,000,000 gallons or approximately 2½ days supply.

During 1946 the water was turned off from 10.30 p.m. until 6 a.m. the following day. On occasions when the water was left on all night for test purposes, bursts were reported. This may be due to a build up of water pressure during the night but it indicates that at least some of the mains and service pipes are not in good condition. It is reasonable to suppose that some seepage into the ground surrounding the pipes takes place during the day and that at night when the pressure inside the water mains is either low or perhaps a negative pressure, the seepage is reversed. It is also not improbable that there is a certain degree of seepage from the drainage system in the same areas and this could result in severe contamination of the water supply, although this has not been proved bacteriologically. It would thus appear that apart from the severe inconvenience of a lack of water during the night for personal hygiene, the cleansing of lavatories and other domestic uses, the system of an intermittent water supply is a very real potential danger.

SEWAGE DISPOSAL.

Sewage is collected at two main pumping stations. The Canal station deals with sewage from the Marine Town area, the newer parts of Mile Town and the new housing estates. The sewage collects in a tide lock storage tank whence it flows out to sea by gravity at low tide or is pumped at high tide. Sewage from Blue Town and the older part of Mile Town is collected at the West Minster pumping station and this also is pumped out to sea. Four subsidiary lifting stations are used throughout the town. The sewage is screened either at one of the lifting stations or at the pumping stations but is not otherwise treated.

New sewers were provided during the year to deal with the sewage from the housing estate of 46 temporary houses in Vincent Gardens and the Council's No. 1 housing estate for 128 houses. Sewers were also commenced for the 202 houses to be erected on the No. 3 estate and approximately 25% of the sewers were completed by the end of the year.

HOUSING.

The housing programme was energetically pursued during 1946 and good progress was made. On the Council's temporary housing estate at Vincent Gardens, 46 temporary prefabricated houses were erected. On the No. 1 estate, 2 permanent houses were completed

by the end of the year, 88 were under construction and a further 38 were approved but work had not commenced. On the No. 3 housing estate work had commenced in the preparation of the site. In addition, 3 houses being built by private enterprise were in the course of construction.

Many of the houses in the Mile Town and Blue Town areas of Sheerness were due for demolition in 1939 and there has been a great increase in dilapidation since then. Minor essential repairs have been carried out in many cases in order to maintain the houses in a reasonably fit condition, but by reason of unsoundness of structure and bad arrangement a large proportion of the houses cannot be made fit in all respects. Moreover the amount of repairs allowed had to be restricted so that the building of new houses should not be impeded.

Some time must elapse before clearance can be restarted but plans are being prepared for the re-development of the Mile Town area as a whole.

SANITARY INSPECTION OF THE AREA.

Number of visits of all kinds made by the Inspector 765

Notices served :—

Statutory	...	...	...	...	Nil
Informal	...	...	...	...	96

NUISANCES AND DEFECTS REMEDIED DURING THE YEAR.

Overcrowding	...	...	...	4
Insufficient sanitary accommodation	...	...	...	3
Defective sanitary accommodation	...	...	...	8
Drainage repaired	...	...	...	4
Drainage cleansed	...	...	...	8
Offensive accumulations	...	...	...	6
Refuse receptacles	...	...	...	8
Smoke nuisances	...	...	...	4
Yard paving	...	...	...	6
Dampness	...	...	...	24
Roofs and rain water pipes	...	...	...	41
Floors	...	...	...	11
Walls and ceilings	...	...	...	17
Windows and ventilation	...	...	...	3
Baths, lavatory basins and sinks	...	...	...	4
Water supplies	...	...	...	4

PREMISES OR OCCUPATIONS CONTROLLED BY BYELAWS OR REGULATIONS.

	No. in District	No. of visits in 1946	No. of faults and defects found	No. of faults and defects remedied
Bakehouses	4	13	—	—
Dairies	2	11	1	1
Slaughter-houses	5	Not in use	—	—
Other food preparing places	23	259	—	—
Houses let in Lodgings	1	9	—	—
Factories	9	37	—	—
Workshops	9			
Workplaces (other than outworkers' homes)	5			

DISINFECTION AND DISINFESTATION.

Number of rooms disinfected after infectious disease	32
Number of batches of clothing etc. disinfected ...	37
Number of rooms disinfested for verminous conditions	110

MILK SUPPLY.

Number of producers	...	...	...	0
Number of producer retailers	...	...	...	0
Number of retailers	...	...	...	3

UN SOUND FOOD.

The following amounts were condemned during the year as unfit for human consumption :—

Eggs	...	...	...	...	636
Cheese	...	...	...	...	70 lbs.
Cereals	...	...	...	...	217 lbs.
Butter	...	...	...	...	24 lbs.
Fish	...	...	...	...	639 lbs.
Meat	...	...	...	...	70 lbs.
Chicken	...	...	...	...	53

Approximate total weight—15 $\frac{1}{4}$ cwt.

MALARIA.

Mosquitoes breed in many of the dykes, ditches and waterways in or adjoining the town. All standing water was sprayed at regular intervals so far as labour and material allowed but mosquitoes caused a considerable amount of discomfort during the warm weather. It is hoped to be able to use some of the newer and more effective preparations for the destruction of the mosquito larvae in the future, and the piping and filling of dykes and drains should cause some improvement by the elimination of the breeding places.

No cases of malaria were notified during the year.

MORTUARY.

A mortuary is provided on the Council's premises. The building is out of date, the approach is bad, and its position is most unsatisfactory, being very close to the Church of England Primary School.

It is intended to build a new mortuary and provision has been made in the estimates of capital expenditure for this, but the shortage of building labour and material will undoubtedly cause delay.

VACCINATION.

Dr. H. A. Madwar, the Public Vaccinator, has kindly supplied me with the following figures :—

Primary vaccinations	..	...	...	161
Re-vaccinations	...	...	...	82

Vital Statistics for 1946.
Compared with 1945, 1944, 1943, 1942.

	1942	1943	1944	1945	1946
Death-rate per 1,000 of population ..	12·9	14·6	11·7	12·9	13·0
Infant Mortality per 1,000 births ..	28·8	57·3	32·6	25·9	56·3
Birth-rate per 1,000 of population ..	18·6	20·2	21·4	20·3	21·4
Total Infectious Diseases, excluding Measles and Tuberculosis ..	105	66	60	34	133
Cases of Smallpox	0	0	0	0	0
Cases of Enteric Fever	1	0	0	0	0
Cases of Diphtheria	11	2	1	0	1
Cases of Scarlet Fever	69	32	13	11	11
Cases of Tuberculosis notified (all forms)	8	8	9	13	15
Deaths from Tuberculosis	9	8	6	5	7
Cases of Malaria	0	0	0	0	0

INFANT MORTALITY.

Causes of Deaths of Infants under one year of age.

Month.	Sex.	Age.	Cause.
February	Male	2 months	Lobar Pneumonia.
February	Female	2 months	Broncho Pneumonia.
December	Female	6 months	Bilateral Lobar Pneumonia.
April	Male	3 months	Hypostatic Pneumonia.
June	Female	15 minutes	Prematurity.
August	Male	3 days	Prematurity.
January	Female	2 hours	Shock and cerebral injuries due to precipitate birth.
October	Female	2 hours	Atelectasis of lungs. Asphyxia neonatorum.
January	Male	1 day	Intracranial haemorrhage.
June	Male	2 days	Icterus neonatorum.
May	Female	5 days	Cerebral haemorrhage.
July	Male	6 days	Intestinal Obstruction. Congenital atresia of large bowel.
August	Male	1 week	Cerebral haemorrhage.
April	Male	1 week	Patent Persistent Ductus Arteriosus.
May	Male	12 days	Atelectasis. Eclampsia of mother.
May	Male	2 weeks	Intracranial haemorrhage.
June	Female	1 month	Infantile Diarrhoea and Vomiting.

CAUSES OF AND AGES AT DEATH DURING THE YEAR, 1946.

MALES.

Causes of Death.	Net deaths at the subjoined ages of "Residents" whether occurring within or without the District.								
	All ages	Under 1 year	1 and under 2 years	2 and under 5 years	5 and under 15 years	15 and under 25 years	25 and under 45 years	45 and under 65 years	65 and upwards
1 Typhoid & parat. fevers ..	0	0	0	0	0	0	0	0	0
2 Cerebro-spinal Fever	1	0	0	0	0	0	0	1	0
3 Scarlet Fever ...	0	0	0	0	0	0	0	0	0
4 Whooping Cough	0	0	0	0	0	0	0	0	0
5 Diphtheria ...	0	0	0	0	0	0	0	0	0
6 Tuberculosis of the Respira- tory System ..	7	0	0	0	0	0	3	4	0
7 Other Tuberculous Diseases	0	0	0	0	0	0	0	0	0
8 Syphilitic diseases ..	1	0	0	0	0	0	0	1	0
9 Influenza ...	2	0	0	0	0	0	0	0	2
10 Measles ...	0	0	0	0	0	0	0	0	0
11 Ac. polio-myel & polio-enceph	0	0	0	0	0	0	0	0	0
12 Ac. inf: encephalitis	0	0	0	0	0	0	0	0	0
13 Cancer, b: cav: & oesoph (M) uterus (F) ...	4	0	0	0	0	0	0	1	3
14 Cancer, stomach & duodenum	0	0	0	0	0	0	0	0	0
15 Cancer, breast ...	0	0	0	0	0	0	0	0	0
16 Cancer, all other sites ..	12	0	0	0	0	0	0	8	4
17 Diabetes ...	0	0	0	0	0	0	0	0	0
18 Intra-cranial vascular lesions	7	0	0	0	0	0	0	1	6
19 Heart Disease ...	27	0	0	0	0	0	1	6	20
20 Other circulatory diseases ...	2	0	0	0	0	0	0	0	2
21 Bronchitis ...	5	0	0	0	0	0	0	0	5
22 Pneumonia (all forms) ...	3	1	0	0	0	0	0	1	1
23 Other respiratory diseases ...	1	1	0	0	0	0	0	0	0
24 Ulcer, stomach or duodenum	0	0	0	0	0	0	0	0	0
25 Diarrhoea (under 2 years) ...	0	0	0	0	0	0	0	0	0
26 Appendicitis ...	0	0	0	0	0	0	0	0	0
27 Other digestive diseases ..	1	0	0	0	0	0	0	0	1
28 Nephritis ...	1	0	0	0	0	0	0	1	0
29 Puerperal & post-abor. sepsis	0	0	0	0	0	0	0	0	0
30 Other maternal causes ...	0	0	0	0	0	0	0	0	0
31 Premature birth ..	1	1	0	0	0	0	0	0	0
32 Con: mal: birth injury, infant: dis: ...	7	7	0	0	0	0	0	0	0
33 Suicide ...	0	0	0	0	0	0	0	0	0
34 Road traffic accidents ..	0	0	0	0	0	0	0	0	0
35 Other violent causes ...	0	0	0	0	0	0	0	0	0
36 All other causes ..	13	0	0	0	1	1	1	2	8
All causes	95	10	0	0	1	1	5	26	52

CAUSES OF AND AGES AT DEATH DURING THE YEAR, 1946.
FEMALES.

Causes of Death.	Net deaths at the subjoined ages of "Residents" whether occurring within or without the District.								
	All ages	Under 1, year	1 and under 2 years	2 and under 5 years	5 and under 15 years	15 and under 25 years	25 and under 45 years	45 and under 65 years	65 and upwards
1 Typhoid & parat. fevers ..	0	0	0	0	0	0	0	0	0
2 Cerebro-spinal Fever ...	0	0	0	0	0	0	0	0	0
3 Scarlet Fever ...	0	0	0	0	0	0	0	0	0
4 Whooping Cough ...	0	0	0	0	0	0	0	0	0
5 Diphtheria ...	0	0	0	0	0	0	0	0	0
6 Tuberculosis of the Respira- tory System ..	0	0	0	0	0	0	0	0	0
7 Other Tuberculous Diseases	0	0	0	0	0	0	0	0	0
8 Syphilitic diseases ..	0	0	0	0	0	0	0	0	0
9 Influenza ...	2	0	0	0	0	0	0	2	0
10 Measles ...	0	0	0	0	0	0	0	0	0
11 Ac. polio-myel & polio-enceph	0	0	0	0	0	0	0	0	0
12 Ac. inf: encephalitis	0	0	0	0	0	0	0	0	0
13 Cancer, b: cav: & oesoph (M) uterus (F) ...	1	0	0	0	0	0	0	1	0
14 Cancer, stomach & duodenum	1	0	0	0	0	0	0	0	1
15 Cancer, breast ...	7	0	0	0	0	0	2	3	2
16 Cancer, all other sites ..	4	0	0	0	0	0	0	3	1
17 Diabetes ...	0	0	0	0	0	0	0	0	0
18 Intra-cranial vascular lesions	11	0	0	0	0	0	0	2	9
19 Heart Disease ...	35	0	0	0	0	0	0	6	29
20 Other circulatory diseases ...	0	0	0	0	0	0	0	0	0
21 Bronchitis ...	2	0	0	0	0	0	0	0	2
22 Pneumonia (all forms) ...	3	2	0	0	0	0	0	1	0
23 Other respiratory diseases ...	1	0	0	0	0	0	0	0	1
24 Ulcer, stomach or duodenum	0	0	0	0	0	0	0	0	0
25 Diarrhoea (under 2 years) ...	0	0	0	0	0	0	0	0	0
26 Appendicitis ...	0	0	0	0	0	0	0	0	0
27 Other digestive diseases ..	1	0	0	0	0	0	0	0	1
28 Nephritis ...	8	0	0	0	0	1	0	1	6
29 Puerperal & post-abor. sepsis	0	0	0	0	0	0	0	0	0
30 Other maternal causes ..	0	0	0	0	0	0	0	0	0
31 Premature birth	1	1	0	0	0	0	0	0	0
32 Con: mal: birth injury, infant: dis: ...	4	4	0	0	0	0	0	0	0
33 Suicide ...	2	0	0	0	0	0	0	1	1
34 Road traffic accidents ..	0	0	0	0	0	0	0	0	0
35 Other violent causes ...	0	0	0	0	0	0	0	0	0
36 All other causes ..	5	0	0	1	0	0	0	3	1
All causes	88	7	0	1	0	1	2	23	54

Infectious Diseases (other than Tuberculosis) during the year 1946.

Disease	Notified			Number Removed to Hospital	Total Deaths Registered
	Total	Males	Females		
Smallpox ...	0	0	0	0	0
Diphtheria ...	1	1	0	1	0
Scarlet Fever ...	11	2	9	11	0
Typhoid & Paratyphoid ...	0	0	0	0	0
Dysentery ...	0	0	0	0	0
Puerperal Pyrexia ...	1	0	1	1	0
Malaria ...	0	0	0	0	0
Erysipelas ...	4	2	2	0	0
Ophthalmia Neonatorum ...	1	1	0	1	0
Pneumonia ...	8	4	4	0	0
Cerebro-spinal Fever ...	0	0	0	0	1*
Acute Poliomyelitis ...	1	1	0	0	0
Measles ...	42	26	16	0	0
Whooping Cough ...	22	11	11	0	0
Chicken Pox ...	84	37	47	0	0
Totals ..	175	85	90	14	1

* Transferable Death. Case not notified in this district.

Age Distribution of Infectious Diseases.

Disease	At all ages	At ages—years											
		Under 1 year	1 to 2 years	2 to 3 years	3 to 4 years	4 to 5 years	5 to 10 years	10 to 15 years	15 to 20 years	20 to 35 years	35 to 45 years	45 to 65 years	65 & upwards
Smallpox	0	0	0	0	0	0	0	0	0	0	0	0	0
Diphtheria	1	0	0	0	0	0	1	0	0	0	0	0	0
Scarlet Fever	11	0	0	0	0	3	4	2	1	1	0	0	0
Typhoid & Paratyphoid	0	0	0	0	0	0	0	0	0	0	0	0	0
Dysentery	0	0	0	0	0	0	0	0	0	0	0	0	0
Puerperal Pyrexia	1	0	0	0	0	0	0	0	0	1	0	0	0
Malaria	0	0	0	0	0	0	0	0	0	0	0	0	0
Erysipelas	4	0	0	0	0	0	0	0	0	1	0	2	1
Ophthalmia Neonatorum	1	1	0	0	0	0	0	0	0	0	0	0	0
Pneumonia	8	1	0	0	1	1	0	0	0	0	1	3	1
Cerebro-spinal Fever	0	0	0	0	0	0	0	0	0	0	0	0	0
Acute Poliomyelitis	1	0	0	0	0	0	0	1	0	0	0	0	0
Measles	42	3	4	6	7	2	20	0	0	0	0	0	0
Whooping Cough	22	2	1	6	3	0	0	0	0	0	0	0	0
Chicken Pox	84	2	2	5	8	2	51	10	3	1	0	0	0
Totals	175	9	7	17	19	8	76	13	4	4	1	5	2

TUBERCULOSIS.

Age	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M	F	M	F	M	F	M	F
Under 1 year	0	0	0	0	0	0	0	0
1 to 5 years	0	0	0	0	0	0	0	0
5 to 15 years	0	1	0	1	0	0	0	0
15 to 25 years	3	0	0	0	0	0	0	0
25 to 35 years	3	1	0	0	0	0	0	0
35 to 45 years	1	0	0	0	3	0	0	0
45 to 55 years	2	0	0	0	1	0	0	0
55 to 65 years	2	0	0	0	3	0	0	0
65 and upwards	1	0	0	0	0	0	0	0
Totals	12	2	0	1	7	0	0	0

Sheppey Rural District Council, 1946.

Chairman - W. J. HAGGAR, J.P.

Vice-Chairman - A. J. ROBINSON.

Councillors :

W. H. BAKER.
E. J. BONNEY.
T. H. DALE.
A. P. DUMMOTT.
A. H. FOREMAN.
W. W. FAGG.
A. JOHNSON, J.P.
H. C. LOVE, J.P.
C. LOVE, Sen.
C. LOVE, Jun.
B. J. MASCALL.

Clerk - H. T. COPLAND, Solicitor.

Sanitary Inspector and Surveyor :

E. F. BRADING, A.R.S.I., M.Inst. M. & Cy.E., M.S.I.A.

PUBLIC HEALTH DEPARTMENT,
SHEERNESS.

June, 1947.

*TO THE CHAIRMAN AND MEMBERS OF THE
SHEPPEY RURAL DISTRICT COUNCIL.*

Mr. Chairman and Councillors,

I am able to report that during 1946 the health of the population was maintained at a very satisfactory level. There were no deaths from the acute notifiable infectious diseases. There was only one case of diphtheria. The number of cases of tuberculosis notified shows no decrease, but the number of deaths was reduced. The birth rate and death rate compare unfavourably with the rates for the previous year, but are satisfactory when compared with the country as a whole.

The population of the Rural District is increasing more rapidly than in either of the other areas of the Island. Since 1943 there has been an increase of 17.3% whereas the increase in Queenborough was 11.8% and in Sheerness 8.8%. Taking the longer period since 1932 the Rural District has shown an increase of nearly 40% whereas the other two districts have decreased. This increase is mainly due to the popularity of the area as a residential district. The district is also becoming increasingly well known as a holiday resort.

Many of the health problems are caused by the influx of summer visitors, particularly to camping grounds, which are not in all cases entirely suitable, and by the sporadic growth of summer residences which were insufficiently controlled in the past and which cannot at reasonable cost be connected to those public services which are so desirable for the maintenance of public health.

Housing, as in other areas, has presented many difficulties, and apart from the temporary prefabricated houses, the building programme progressed very slowly, but the opening of Bell Farm Camp at the end of the year for civilian housing did relieve some of the more necessitous cases.

I have to thank you and all the members of your staff for the encouragement and assistance which you have given me.

Your obedient servant,

R. DUNCAN DEWAR,

Medical Officer of Health.

STATISTICS AND SOCIAL CONDITIONS OF THE SHEPPEY RURAL DISTRICT.

Area (acres) ...	...	...	...	...	...	19,949
Population estimated for mid-1946 by Registrar-General ...	...	...	...	...	...	8,236
Number of inhabited houses ...	...	...	...	...	...	2,837
Rateable value ...	...	...	...	...	...	£51,611
Sum represented by a Penny Rate ...	...	...	...	...	...	£202

EXTRACTS FROM VITAL STATISTICS FOR THE YEAR.

Live Births—	Total.	Male.	Female.	Birth Rate per 1,000 of the estimated resident population ...	...	22.3
Legitimate	173	81	92			
Illegitimate	11	5	6			
Total	184	86	98			
Still Births—	4	2	2	Rate per 1,000 total (live and still) births		21.3
Deaths—	96	51	45	Death Rate per 1,000 of the estimated resident population ...	...	11.6

Deaths from puerperal causes—

	Deaths.	Rate per 1,000 total (live and still) births.
Puerperal Sepsis ...	0	0.0
Other Puerperal causes ...	0	0.0
Total ...	0	0.0

Death Rate of Infants under one year of age—

All infants per 1,000 live births ...	...	38.0
Illegitimate infants per 1,000 illegitimate live births ...	...	0.0
Legitimate infants per 1,000 legitimate live births ...	...	40.4
Deaths from Measles (all ages) ...	...	0
Deaths from Whooping Cough (all ages)...	...	0
Deaths from Diarrhoea and Enteritis (under 2 years)	...	0

NOTES ON VITAL STATISTICS.

The mid-year population of the Rural District is estimated by the Registrar-General to be 8,236, which is an increase of 637 over the estimate for 1945.

Births registered during the year numbered 184 giving a birth rate of 22.3 per 1,000 of the population. This is a decrease of 1.8 on the previous year but it is still 3.2 above the figure for the whole country. Eleven of the births, or 6%, were illegitimate.

There were 96 deaths registered during the year, equivalent to a death rate of 11.6 per 1,000 of the population, which is an increase of 2.3 over the death rate for 1945 and 0.1 above the rate for England and Wales. There were no maternal deaths.

There were 7 deaths of infants under one year which is equivalent to an infant mortality rate of 38.0. This is a satisfactorily low figure, but the yearly variations are so large that it is unreliable for purposes of comparison.

There were 133 notified cases of infectious disease which included one case of diphtheria and one case of poliomyelitis. There were no deaths from any of these cases. The total number of notifications was less than in 1945 but the difference is mainly due to the large number of cases of chicken pox during 1945 and the number of cases of the more serious infectious diseases is not substantially different.

There were 11 new cases of tuberculosis notified which is the same as during 1945, but there was only 1 death from this cause as compared with 4 deaths in the previous year.

Although the statistics appear to be satisfactory, they are less good than in previous years. The birth rate which was, during the previous five years, 26% above the average for England and Wales, was only 16.7% above the rate for England and Wales during 1946; and the death rate which had been 11% below the average for England and Wales during 1941-45, was fractionally above the rate for the whole country during 1946.

HEALTH SERVICES IN THE AREA.

ANTE-NATAL CLINICS.

These clinics are provided by the Kent County Council and are held at the Working Men's Club, Minster, every Wednesday from 9 a.m. to 12 noon. Dr. M. F. McNamara is the Medical Officer.

INFANT WELFARE.

These clinics are provided by the Kent County Council and are held at the following times and places:—

Minster—Liberty Hall, Minster, 1st, 3rd and 5th Wednesdays at 2 p.m.
Medical Officer—Dr. M. F. McNamara.

Eastchurch—Working Men's Club, 2nd and 4th Wednesday at 2 p.m.
Medical Officer—Dr. Jill Hutt.

Halfway—Conservative Hall, every Friday at 1.30 p.m.
Medical Officer—Dr. M. F. McNamara.

DIPHTHERIA IMMUNISATION.

Immunisation is carried out at all the Infant Welfare Clinics and also by medical practitioners. Payment is made for these services by arrangement with the County Council.

By the end of 1946 there were 275 children under 5 years of age and 424 children aged 5 to 14 who had been immunised. These figures are 34% and 37% of their respective age groups.

FEVER HOSPITAL.

Keycol Hill Isolation Hospital, under the management of the Sittingbourne and Milton Joint Hospital Board, normally takes all infectious cases requiring hospital treatment and special arrangements exist for the treatment of smallpox and ophthalmia neonatorum. Measles and whooping cough are not usually removed to hospital. Five cases of infectious disease were admitted to the hospital during the year.

MIDWIFERY AND HOME NURSING.

This service is performed by the Minster Sick Nursing Association and their address is 6 Queen's Road, Minster. The Kent County Council is the supervising authority for midwives.

HOME HELPS.

A Home Help Scheme provided by the County Council is in operation in the area.

HOSPITAL.

Provision is made for in-patient treatment of medical, surgical and maternity cases at the County Hospital, Minster.

Out-patient sessions are held at the following times.

Monday, 2 p.m.	Surgical	Dr. P. Berry
Monday, 2 p.m.	Ante-Natal	Dr. F. Schmelz
Tuesday, 2 p.m.	Medical	Dr. D. H. Mills
Wednesday, 2 p.m.	Gynaecological	Dr. F. Schmelz
Thursday, 2 p.m.	Surgical	Dr. W. L. Wills

In addition, Mr. J. H. Mayer attends at the Orthopaedic Clinic on the second Wednesday of each month at 2 p.m. and Mr. E. P. Gill attends the Ear, Nose and Throat Clinic at the hospital on the first, third and fifth Monday of each month at 10 a.m. X-ray facilities are also available at the hospital.

AMBULANCE SERVICE.

There is no Ambulance stationed in the Rural District but the area is served by the Sheerness and Queenborough S.J.A.B. ambulances.

PATHOLOGICAL SERVICE.

The County Laboratory is situated at the County Hall, Maidstone, and provides a free and comprehensive service for medical practitioners. Routine samples of water and milk supplies are sent to the Laboratory for examination and assistance is also available in the event of epidemics.

TUBERCULOSIS.

The Visiting Tuberculosis Officer is Dr. S. Roy C. Price and the Clinic is held at Granville Villa, Granville Road, Sheerness, on the first, third and fifth Thursdays of the month from 12 noon until 2 p.m.

VENEREAL DISEASE.

The Visiting Venereologist is Dr. Ockwell and the Clinic is held at 61 Alma Road, Sheerness, men attending from 10—11 a.m. and women from 11—12 noon every Saturday.

SCHOOL HEALTH SERVICE.

This service is under the control of Dr. A. Elliott, School Medical Officer for the County.

All schools are visited twice a year and during their school life, children are examined four times; if any diseases or defects requiring observation or treatment are detected, then further examinations are made at subsequent visits.

The Kent Education Committee provides a service of specialists for the treatment of teeth, eye and ear, nose and throat, orthopaedic cases and psychological cases, while minor ailments are dealt with at the School Clinic, Granville Villa, Granville Road, Sheerness.

SANITARY CIRCUMSTANCES OF THE AREA.

WATER.

There are three main supplies of water in the district, all of which are obtained from deep wells and are chlorinated.

The Sheppey Rural District Council has a bore at Warden which supplies the parish of Warden, a portion of the parish of Eastchurch and about half the parish of Leysdown. The Leysdown Water Company has a bore at Leysdown which supplies the remainder of the parish of Leysdown.

The Sheppey Water Company has three bores, situated at Abbey Works, Minster; Wallend, Minster; and Water Lane, Eastchurch. The water from the Wallend pumping station of the Sheppey Water Company is very hard and it is softened by the Candy Lime process before distribution. All the other waters are soft waters and do not therefore receive any additional treatment.

The parishes of Elmley and Harty have no piped supply and water is obtained from private wells.

The quantity of water has been adequate although there have been temporary shortages in several areas due to the breakdown of pumping plant or to difficulties of distribution. The exact quantity of water supplied is not available but it was in the region of 20 to 22 gallons per head of the population per day for all purposes.

The method of supply is as follows:—

Parish.	Direct to houses.	Standpipe.	Wells.
Minster	2082	—	—
Eastchurch	400	25	—
Leysdown	200	—	—
Warden	100	—	—
Elmley and Harty	—	—	30

The population so supplied numbers 8,236. The exact numbers for each area are not at present available.

Bacteriological examination of the water supplies is now carried out at monthly intervals. The reports for 1946 are summarised below.

Source of supply	Number of samples taken	Number of organisms per cc capable of growth on agar at			
		Average of all samples	Highest in any sample	Average of all samples	Highest in any sample
Warden Pumping Station Sheppey R.D.C. Treated.	11	0	0	0	0
Leysdown Pumping Station Leysdown Water Co. Treated.	9	0	0	8	16
Abbey Works, Minster Water Lane, Eastchurch	19	less than 1	10	2	16
Wallend, Minster Sheppey Water Co.	10	less than 1	2	3	12
		Untreated			

No typical *B. coli* were found in any sample.

The results of chemical analyses are given below.

	Wallend.	Eastchurch.	Warden.	Leysdown.
	Parts per 100,000			
Total solid residue ...	66.0	64.0	60.5	66.0
Chlorine ...	5.1	8.7	12.0	12.0
Free Ammonia ...	0.08	0.006	0.040	0.040
Albuminoid Ammonia ...	0.002	—	0.002	0.004
Nitrogen as Nitrates ...	—	—	—	—
Oxygen absorbed, ¼ hour at 80° F.	0.02	0.012	0.026	0.12
Oxygen absorbed, 4 hours at 80° F.	0.05	0.023	0.052	0.22
Nitrites ..	—	Present	Very faint	Very faint
Hardness—			trace	trace
Permanent ...		None	None	None
Temporary ...		1.6	None	None
Total ...		1.6	None	None

Remarks :

Wallend—Water is of good organic quality.

Eastchurch—The sample was free from deposit and excessive hardness—indeed, it is an exceptionally soft water. On the above chemical analysis it is of satisfactory organic quality and is fit for drinking.

Warden—The sample is of fair though not outstanding quality for a deep borehole water. I should not, on the above chemical analysis, regard it as suitable for a public supply, unless treated.

Leysdown—The water is of poor organic quality and is unsuitable for drinking unless it is treated.

There is no evidence that any of the waters have any natural plumbo-solvent action.

SEWAGE DISPOSAL.

Main drainage systems are in operation in the parishes of Minster and Eastchurch. In Minster there are four pumping stations and full treatment of the sewage is carried out at the pumping stations at Sheerness East and at Scrapsgate. The effluent is discharged from both stations into the sea at Scrapsgate.

In Eastchurch the sewage flows by gravity. The sewage is partially treated at Shurland Meadow and at Parsonage Farm, the effluent being discharged into water courses whence it reaches the sea.

In the Parish of Minster the additions to drainage system were—

300 yards of 6 in. sewer to serve the new temporary houses on Broadway, Minster.

500 yards of 9 in. sewer to serve the new Harps housing estate.

No extension of the sewers was carried out in the parish of Eastchurch during 1946.

The method of sewage disposal throughout the Rural District of Sheppey is summarised below :

Parish.	Main drainage.	Cesspools.	Pail closets.
Minster	1886	267	176
Eastchurch	97	247	183
Warden	Nil	127	19
Leysdown	Nil	190	72
Elmley and Harty	Nil	23	21

During the year 7 houses in the parish of Minster which had previously had cesspool drainage were connected to the main drainage system.

HOUSING.

New housing progressed slowly during 1946, mainly on account of shortage of labour.

Housing carried out for the Council was :

Temporary prefabricated houses—32 completed.

Permanent houses—2 completed, 16 under construction.

A further 18 permanent houses were approved but not started.

By private enterprise 12 houses were completed and a further 12 were under construction.

In addition to the above, the Military Camp at Bell Farm was offered to the Council for temporary housing. The accommodation consists mainly of corrugated asbestos Nissen huts and there are communal sanitary and washing facilities. In order to provide one family unit—a hut was partitioned so as to provide two bedrooms, a large living room and storage space for food and fuel. A solid fuel cooking stove and a piped water supply and sink were also provided. Owing to the difficulty of supplying electric meters, a fixed charge

was made for electric light and the tenants paid a fixed charge to include rent, rates, water rate and electricity.

A few huts were of wooden construction and it was possible in these to provide somewhat larger accommodation and in some to provide a W.C. inside the hut. The camp is sufficient to provide approximately 50 family units and first families moved in officially on 23rd December, 1946, although there had been some squatters earlier.

SANITARY INSPECTION OF THE AREA.

Number of visits of all kinds made by the Inspector 3465

Notices served :—

Statutory	...	...	...	...	2
Informal	...	...	...	...	90

NUISANCES AND DEFECTS REMEDIED DURING THE YEAR.

Overcrowding	...	...	...	3
Keeping of animals	...	...	...	3
Insufficient sanitary accommodation	...	...	...	11
Defective sanitary accommodation	...	...	...	9
Drainage reconstructed	...	...	...	7
Drainage repaired	...	...	...	1
Drainage cleansed	...	...	...	55
Offensive accumulations	...	...	...	6
Refuse receptacles	...	...	...	18
Yard paving	...	...	...	1
Dampness	...	...	...	6
Roofs and rain water pipes	...	...	...	75
Floors	...	...	...	29
Walls and ceilings	...	...	...	87
Windows and ventilation	...	...	...	24
Baths, lavatory basins and sinks	...	...	...	17
Water supplies	...	...	...	4

PREMISES OR OCCUPATIONS CONTROLLED BY BYELAWS OR REGULATIONS.

	No. in District	No. of visits in 1946	No. of faults & defects found	No. of faults & defects remedied
Bakehouses	1	1	—	—
Dairies	15	30	6	6
Food preparing places	1	—	—	—
Factories	8	6	—	—
Workplaces	19	—	—	—

DISINFECTION AND DISINFESTATION.

Number of rooms disinfected after infectious disease	8
Batches of clothing etc. disinfected	11
Number of rooms disinfested for verminous conditions	3

MILK SUPPLY.

Number of producers	...	...	...	13
Number of producer retailers	...	...	...	8
Number of retailers	...	...	...	1
Number of farms licensed to produce accredited milk				1

UNSOUND FOOD.

The weight of food condemned during the year as unfit for human consumption was 7 cwt. 1 qr. 20 lbs.

RURAL HOUSING SURVEY.

Of 2,733 houses within the scope of the survey, 2,624 have been inspected and classified.

MALARIA.

Mosquitoes have always caused a great deal of nuisance in the area and it is impossible in a district such as this to eliminate or treat every breeding place. Ditches, dykes and water-courses in the neighbourhood of houses are sprayed with oil so far as labour allows but it is impossible to maintain completely effective control. In particular there are many water holes around the popular part of the coast which are formed by the subsidence of the cliffs and some of these are quite inaccessible.

Unfortunately amongst the types of mosquitoes which breed in this area there are some *Anopheles* mosquitoes which are capable of transmitting malaria. In this country the winter temperature is never sufficiently high to allow of the persistence of malarial parasites in mosquitoes from one summer until the next. Summer temperatures are not always sufficient to allow of the development of the parasites of the benign types of malaria and it would be very rare for the temperature to be sufficiently high for a sufficient period for the development of the parasite causing malignant tertian malaria. As already stated the parasites cannot persist in mosquitoes through the winter and so it is necessary for some person suffering from malaria to live on or visit the Island before the mosquitoes themselves can become infected and capable of transmitting the disease. Under post-war conditions this is not unlikely and it is possible that in a hot summer there may be some cases of malaria in the district but it is most unlikely that there will be any considerable number.

One case was reported during 1946 which almost certainly contracted malaria on the Isle of Sheppey but no notifications were received in the area.

VACCINATION.

Dr. H. A. Madwar has kindly supplied me with the following figures:—

Number of primary vaccinations during 1946	...	79
Number of re-vaccinations during 1946	...	2

Vital Statistics for 1946.
Compared with 1945, 1944, 1943, 1942.

	1942	1943	1944	1945	1946
Death-rate per 1,000 of population ..	10·6	10·8	11·5	9·5	11·6
Infant Mortality per 1,000 births ..	50·6	51·3	54·6	5·5	38·0
Birth-rate per 1,000 of population ..	22·6	22·2	25·4	24·1	22·3
Total Infectious Diseases, excluding Measles and Tuberculosis ..	59	32	123	36	117
Cases of Smallpox	0	0	0	0	0
Cases of Enteric Fever	0	0	0	0	0
Cases of Diphtheria	0	1	0	0	1
Cases of Scarlet Fever	36	10	3	4	4
Cases of Tuberculosis notified (all forms)	2	5	6	11	11
Deaths from Tuberculosis	2	4	2	4	1
Cases of Malaria	0	1	0	0	0

INFANT MORTALITY.

Causes of Deaths of Infants under one year of age.

Month.	Sex.	Age.	Cause.
August	Male	5 months	Broncho Pneumonia.
January	Male	2 hours	Prematurity, Feebleness and cyanosis.
April	Female	3 days	Premature Birth.
May	Male	2 weeks	Prematurity.
November	Female	3 days	Cerebral haemorrhage. Precipitate labour.
July	Female	5 days	Cerebral haemorrhage.
January	Female	3 months	Suffocation through turning on her face in cot.

CAUSES OF AND AGES AT DEATH DURING THE YEAR, 1946.
MALES.

Causes of Death.	Net deaths at the subjoined ages of "Residents" whether occurring within or without the District.								
	All ages	Under 1 year	1 and under 2 years	2 and under 5 years	5 and under 15 years	15 and under 25 years	25 and under 45 years	45 and under 65 years	65 and upwards
1 Typhoid & parat. fevers ...	0	0	0	0	0	0	0	0	0
2 Cerebro-spinal Fever ...	0	0	0	0	0	0	0	0	0
3 Scarlet Fever ...	0	0	0	0	0	0	0	0	0
4 Whooping Cough ...	0	0	0	0	0	0	0	0	0
5 Diphtheria ...	0	0	0	0	0	0	0	0	0
6 Tuberculosis of the Respira- tory System ...	1	0	0	0	0	0	1	0	0
7 Other Tuberculous Diseases ...	0	0	0	0	0	0	0	0	0
8 Syphilitic diseases ...	0	0	0	0	0	0	0	0	0
9 Influenza ...	1	0	0	0	0	0	0	1	0
10 Measles ...	0	0	0	0	0	0	0	0	0
11 Ac. polio-myel & polio-enceph	0	0	0	0	0	0	0	0	0
12 Ac. inf: encephalitis ...	0	0	0	0	0	0	0	0	0
13 Cancer, b: cav: & oesoph (M) uterus (F) ...	0	0	0	0	0	0	0	0	0
14 Cancer, stomach & duodenum	2	0	0	0	0	0	0	1	1
15 Cancer, breast ...	0	0	0	0	0	0	0	0	0
16 Cancer, all other sites ...	4	0	0	0	0	0	0	1	3
17 Diabetes ...	0	0	0	0	0	0	0	0	0
18 Intra-cranial vascular lesions	1	0	0	0	0	0	0	0	1
19 Heart Disease ...	24	0	0	0	0	0	0	4	20
20 Other circulatory diseases ...	2	0	0	0	0	0	0	0	2
21 Bronchitis ...	1	0	0	0	0	0	0	0	1
22 Pneumonia (all forms) ...	2	1	0	0	0	0	0	0	1
23 Other respiratory diseases ...	1	0	0	0	0	0	0	0	1
24 Ulcer, stomach or duodenum	0	0	0	0	0	0	0	0	0
25 Diarrhœa (under 2 years) ...	0	0	0	0	0	0	0	0	0
26 Appendicitis ...	0	0	0	0	0	0	0	0	0
27 Other digestive diseases ...	1	0	0	0	0	1	0	0	0
28 Nephritis ...	3	0	0	0	0	1	0	0	2
29 Puerperal & post-abor. sepsis	0	0	0	0	0	0	0	0	0
30 Other maternal causes ...	0	0	0	0	0	0	0	0	0
31 Premature birth ...	2	2	0	0	0	0	0	0	0
32 Con: mal: birth injury, infant: dis: ...	0	0	0	0	0	0	0	0	0
33 Suicide ...	1	0	0	0	0	0	0	1	0
34 Road traffic accidents ...	0	0	0	0	0	0	0	0	0
35 Other violent causes ...	1	0	0	0	0	0	0	0	1
36 All other causes ...	4	0	0	0	0	0	1	2	1
All causes	51	3	0	0	0	2	2	10	34

CAUSES OF AND AGES AT DEATH DURING THE YEAR, 1946.
FEMALES.

Causes of Death.	Net deaths at the subjoined ages of "Residents" whether occurring within or without the District.								
	All ages	Under 1 year	1 and under 2 years	2 and under 5 years	5 and under 15 years	15 and under 25 years	25 and under 45 years	45 and under 65 years	65 and upwards
1 Typhoid & parat. fevers ...	0	0	0	0	0	0	0	0	0
2 Cerebro-spinal Fever ...	0	0	0	0	0	0	0	0	0
3 Scarlet Fever ...	0	0	0	0	0	0	0	0	0
4 Whooping Cough ...	0	0	0	0	0	0	0	0	0
5 Diphtheria ...	0	0	0	0	0	0	0	0	0
6 Tuberculosis of the Respira- tory System ..	0	0	0	0	0	0	0	0	0
7 Other Tuberculous Diseases	0	0	0	0	0	0	0	0	0
8 Syphilitic diseases ..	0	0	0	0	0	0	0	0	0
9 Influenza ...	1	0	0	0	0	0	0	1	0
10 Measles ...	0	0	0	0	0	0	0	0	0
11 Ac. polio-myel & polio-enceph	0	0	0	0	0	0	0	0	0
12 Ac. inf: encephalitis ..	0	0	0	0	0	0	0	0	0
13 Cancer, b: cav: & oesoph (M) uterus (F) ...	2	0	0	0	0	0	0	2	0
14 Cancer, stomach & duodenum	0	0	0	0	0	0	0	0	0
15 Cancer, breast ...	1	0	0	0	0	0	0	1	0
16 Cancer, all other sites ..	2	0	0	0	0	0	0	1	1
17 Diabetes ...	1	0	0	0	0	0	0	1	0
18 Intra-cranial vascular lesions	3	0	0	0	0	0	0	1	2
19 Heart Disease ...	19	0	0	0	0	0	0	3	16
20 Other circulatory diseases ...	1	0	0	0	0	0	0	0	1
21 Bronchitis ...	1	0	0	0	0	0	0	1	0
22 Pneumonia (all forms) ...	2	0	0	0	0	1	0	0	1
23 Other respiratory diseases ...	0	0	0	0	0	0	0	0	0
24 Ulcer, stomach or duodenum	0	0	0	0	0	0	0	0	0
25 Diarrhoea (under 2 years) ...	0	0	0	0	0	0	0	0	0
26 Appendicitis ...	0	0	0	0	0	0	0	0	0
27 Other digestive diseases ...	1	0	0	0	0	0	0	1	0
28 Nephritis ...	3	0	0	0	0	0	0	1	2
29 Puerperal & post-abor. sepsis	0	0	0	0	0	0	0	0	0
30 Other maternal causes ...	0	0	0	0	0	0	0	0	0
31 Premature birth ..	1	1	0	0	0	0	0	0	0
32 Con: mal: birth injury, infant: dis: ...	2	2	0	0	0	0	0	0	0
33 Suicide ...	0	0	0	0	0	0	0	0	0
34 Road traffic accidents ...	0	0	0	0	0	0	0	0	0
35 Other violent causes ...	1	1	0	0	0	0	0	0	0
36 All other causes ...	4	0	0	0	0	0	1	0	3
All causes ...	45	4	0	0	0	1	1	13	26

Infectious Diseases (other than Tuberculosis) during the year 1946.

Disease	Notified			Number Removed to Hospital	Total Deaths Registered
	Total	Males	Females		
Smallpox ...	0	0	0	0	0
Diphtheria ...	1	1	0	1	0
Scarlet Fever ...	4	4	0	4	0
Typhoid & Paratyphoid ...	0	0	0	0	0
Dysentery ...	0	0	0	0	0
Puerperal Pyrexia ...	0	0	0	0	0
Malaria ...	0	0	0	0	0
Erysipelas ...	6	3	3	0	0
Ophthalmia Neonatorum ...	0	0	0	0	0
Pneumonia ...	25	12	13	0	0
Cerebro-spinal Fever ...	0	0	0	0	0
Acute Poliomyelitis ...	1	1	0	0	0
Measles ...	16	10	6	0	0
Whooping Cough ...	6	3	3	0	0
Chicken Pox ...	74	43	31	0	0
Totals ...	133	77	56	5	0

Age Distribution of Infectious Diseases.

Disease	At all ages	At ages—years											
		Under 1 year	1 to 2 years	2 to 3 years	3 to 4 years	4 to 5 years	5 to 10 years	10 to 15 years	15 to 20 years	20 to 35 years	35 to 45 years	45 to 65 years	65 & upwards
Smallpox	0	0	0	0	0	0	0	0	0	0	0	0	0
Diphtheria	1	0	0	0	0	0	0	0	0	1	0	0	0
Scarlet Fever	4	0	0	0	0	1	3	0	0	0	0	0	0
Typhoid & Paratyphoid	0	0	0	0	0	0	0	0	0	0	0	0	0
Dysentery	0	0	0	0	0	0	0	0	0	0	0	0	0
Puerperal Pyrexia	0	0	0	0	0	0	0	0	0	0	0	0	0
Malaria	0	0	0	0	0	0	0	0	0	0	0	0	0
Erysipelas	6	0	0	0	0	0	0	0	0	0	1	4	1
Ophthalmia Neonatorum	0	0	0	0	0	0	0	0	0	0	0	0	0
Pneumonia	25	0	0	0	2	1	2	3	2	6	3	5	1
Cerebro-spinal Fever	0	0	0	0	0	0	0	0	0	0	0	0	0
Acute Poliomyelitis	1	0	0	0	0	0	1	0	0	0	0	0	0
Measles	16	0	0	4	5	1	5	1	0	0	0	0	0
Whooping Cough	6	0	0	1	2	2	1	0	0	0	0	0	0
Chicken Pox	74	1	1	2	4	8	46	8	1	1	2	0	0
Totals	133	1	1	7	13	13	57	13	3	8	6	9	2

TUBERCULOSIS.

Age	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M	F	M	F	M	F	M	F
Under 1 year	0	0	0	0	0	0	0	0
1 to 5 years	0	0	0	0	0	0	0	0
5 to 15 years	0	0	1	0	0	0	0	0
15 to 25 years	1	0	0	0	0	0	0	0
25 to 35 years	1	1	0	0	0	0	0	0
35 to 45 years	4	1	0	0	0	0	0	0
45 to 55 years	1	1	0	0	0	0	0	0
55 to 65 years	0	0	0	0	0	0	0	0
65 and upwards	0	0	0	0	0	0	0	0
Totals	7	3	1	0	0	0	0	0

Meteorology.

Meteorological observations have not been recorded at Sheerness since 1939, but Mr. E. W. Cooper of Ad Astra, Warden Point, has very kindly supplied me with the following records taken at his private observatory.

Temperatures in Degrees Fahrenheit.

1946.		Mean of Maximum	Mean of Minimum	Highest Maximum	Date recorded	Lowest Minimum	Date recorded
June	...	62.8	49.8	68	21, 30	45	4, 11, 12, 20
July	...	68.1	54.8	83	2	47	15
August	...	64.5	53.5	71	4, 6	49	12, 19, 30
September	...	62.1	52.6	75	27	46	14
October	...	53.7	48.6	63	1, 2, 3, 5	34	25
November	...	49.4	43.3	58	4	35	17
December	...	39.9	33.8	47	6, 12	23	22
Averages	...	57.2	48.0	83	July 2	23	Dec. 22

Rainfall, Sunshine and Barometric Pressure.

		Rainfall. Inches	Sunshine. Hours	Pressure. Millibars
June	...	2.19	203.2	1018.3
July	...	1.29	253.7	1021.1
August	...	3.27	189.9	1015.3
September	...	1.42	139.0	1016.9
October	...	1.14	104.8	1021.2
November	...	3.17	66.9	1010.5
December	...	1.73	68.0	1015.7
		Total 14.21	Total 1025.5	Daily Average
		Monthly Average 2.03	Daily Average 4.79	1017.0